



Figure 1: Chart showing the sustainable mental health provision model

To be fully effective and efficient, primary mental health care must be complemented by additional levels of care, (WHO, 2009). These include secondary care components to which primary health workers can turn for referrals, support, and supervision. Linkages to informal and community-based services also are necessary. This integration will entail that the training of counsellors and psychologists is embedded in the health system. The students should be part of the

system and should get paid during training. Fully trained psychologists should be engaged in all health care facilities and public institutions to offer training and mental health services. Besides health care facilities, psychologists, clinical social workers and counsellors should be engaged in public schools, district education offices, prisons, colleges and other public institutions.

The government should invest in non-pharmacological mental health service provision. This will be done partly by

employing psychologists and counsellors within the primary health care system and public institutions. There should also be serious investment in tools of the trade such as psychometric instruments which are necessary for screening and diagnosis of mental disorders.

This model also posits that the government should absorb clinical and counselling psychology interns into the health sector as a matter of urgency. The proposal is that every Psychiatric Hospital should have at least ten (10) interns, every Provincial Hospital to have at least five (5) interns and at least one intern psychologist for every District Hospital. This arrangement will entail the engagement of fully registered psychologists at all the stated hospitals to ensure proper supervision of the interns.

The school system represents a greater chunk of the population of Zimbabwe. In that regard, it is necessary to ensure that educational psychologists are engaged at every public school. Currently, only private schools are engaging psychologists in their schools and public schools access psychologists at the provincial level.

Registration and compliance of mental health practitioners are critical as it ensures that only properly qualified people are engaged to offer mental health services. This arrangement ensures that the mental health of members of the public is protected from charlatans and persons of dubious qualifications who may end up hurting instead of healing clients. The emphasis on professionalism is a key issue that arose from the findings of this study and as such, it is necessary that regulatory bodies should monitor those who offer mental services.

There is a need to raise awareness of the causes and treatment of mental illnesses to deal with the stigma currently associated with mental illnesses in our communities. This will need the full engagement of psychologists, counsellors and social workers.

The integration of non-pharmacological mental health options in primary health care facilities in a sustainable approach to the prevention, treatment and management of mental illness as these primary health care facilities are within reach of most people. Moreover, currently, there is a relatively high number of non-pharmacological practitioners who are fully trained and some still under training who can provide the services. The availability of these practitioners entails that the approach will be sustainable.

Conclusion

This study revealed that there are many challenges with the Zimbabwean mental health system. Participants revealed many non-pharmacological options that can be pursued in the Zimbabwean context. The options provided pointed towards a multi-disciplinary approach to mental health and a sustainable mental health provision model.

The Zimbabwean mental health system is currently unsustainable as it is relying on a poorly resourced pharmacological approach hinged on only four psychiatric centres and very few psychiatrists and psychiatric nurses. The system currently does not seem to give any serious recognition to non-pharmacological practitioners who include psychologists, counsellors and clinical social workers.

A sustainable approach to the provision of mental health entails the

engagement of treatment plans that are affordable to the government. Currently, there is an over-reliance on pharmacological treatment plans which are not only largely unavailable to the majority of citizens but also too expensive to both the government and individuals. There is therefore a need for policy reformulation so that there can be a focus and an investment in non-pharmacological treatment options. These non-pharmacological interventions would need to be integrated within the primary health care system which is available to the majority of the people. To enhance the sustainability of this approach, there will be a need to adopt a multi-disciplinary approach to the treatment of mental illness.

There is a need to ensure that counsellors and psychologists are available at the school level. That will guarantee the sustainability of mental health services in the school system to which almost all children belong. Overall there is a need to ensure that mental health provision is pervasive in all public institutions. There should be clear screening and treatment platforms at all primary health care centres.

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